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Approved for use through 10/31/2002. OMB 0651-0031

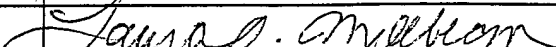
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| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 09/421,718 | |
| | Confirmation Number | 4530 | |
| | Filing Date | 10/20/1999 | |
| | First Named Inventor | Christie | |
| | Group Art Unit | 2664 | |
| Examiner Name | | Kwang Bin Yao | |
| Total Number of Pages in This Submission | 4 | Attorney Docket Number | 1128c |

| ENCLOSURES (check all that apply) | | |
|---|---|--|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks It is believed that no fees are due in this matter. However, if it is determined that fees are due, the Commissioner is authorized to debit Deposit Account No. 21-0765 for the required fees. | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Stephen S. Roche, Reg. 52,176 |
| Signature |  |
| Date | 5/29/03 |

| CERTIFICATE OF MAILING | | | |
|--|---|------|---------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on this date: <u>5-29-03</u> | | | |
| Typed or printed name | Laura S. Melblom | | |
| Signature |  | Date | 5-29-03 |

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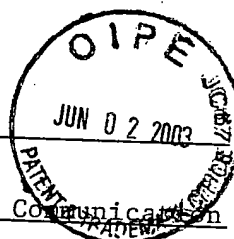
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In Re: Patent Application of: Christie

Serial No.: 09/421,718

Date filed: 10/20/99

Title: System and Method for Interfacing a Local Communication Device



☐ Recordation Form Cover Sheet _____ page(s) ☐ Assignment _____ page(s)
☐ Drawings (_____ sheets) Number of FIGS: _____
☐ Declaration and POA _____ page(s) ☐ Application Data Sheet _____ page(s)
☒ Transmittal 1 page(s) ☐ Petition for Extension of Time _____ page
☐ Fee Transmittal _____ page(s)
☒ Amendment 4 page(s) After Final
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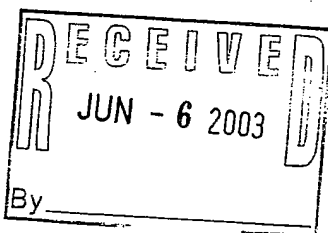
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Date docketed: 6/6/03
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In Re: Patent Application of: Christie
 Serial No.: 09/421,718
 Date filed: 10/20/99
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**REPLY UNDER 37 CFR 1.116
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#19

Practitioner's Docket No. 1128C

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Christie, et al.
Application No.: 09/421,718
Filed: 10/20/1999

Group No.: 2664
Examiner: Yao, K.

For: SYSTEM AND METHOD FOR INTERFACING A LOCAL COMMUNICATION
DEVICE

**Mail Stop: AF
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450**

RESPONSE

Dear Sir:

In response to a Final Office Action dated April 1, 2003, please consider the following remarks. Applicant has hereby filed a complete reply to the final Office Action in accordance with MPEP 706.07(f)(D).